Amendments to the Specification

Please replace the paragraph beginning at page 25, line 28 with the following:

When an anti-PSMA antibody is selected as the treatment, the anti-PSMA antibody, e.g., a modified anti-PSMA antibody, or antigen-binding fragment thereof, described, e.g., in U.S. Pat. Nos. 6,107,090 and 6,136,311, and PCT Publication No: WO 02/098897, e.g., can be administered to a subject, or used *in vitro*, in non-derivatized or unconjugated forms. In other embodiments, the anti-PSMA antibody, or antigen-binding fragment thereof, can be derivatized or linked to another molecular entity, typically a label or a therapeutic (e.g., a cytotoxic or cytostatic) agent. The molecular entity can be, e.g., another peptide, protein (including, e.g., a viral coat protein of, e.g., a recombinant viral particle), a non-peptide chemical compound, isotope, etc. The anti-PSMA antibody, or antigen-binding fragment thereof, can be functionally linked, e.g., by chemical coupling, genetic fusion, non-covalent association or otherwise, to one or more other molecular entities. For example, the anti-PSMA antibody, or antigen-binding fragment thereof, can be coupled to a label, such as a fluorescent label, a biologically active enzyme label, a radioisotope (e.g., a radioactive ion), a nuclear magnetic resonance active label, a luminescent label, or a chromophore. In other embodiments, the anti-PSMA antibody, or antigen-binding fragment thereof, can be coupled to a therapeutic agent, e.g., a cytotoxic moiety, e.g., a therapeutic drug, a radioisotope, molecules of plant, fungal, or bacterial origin, or biological proteins (e.g., protein toxins) or particles (e.g., recombinant viral particles, e.g., via a viral coat protein), or mixtures thereof. The therapeutic agent can be an intracellularly active drug or other agent, such as short-range radiation emitters, including, for example, short-range, high-energy α-emitters, as described herein. In some preferred embodiments, the anti-PSMA antibody, or antigen binding fragment thereof, can be coupled to a molecule of plant or bacterial origin (or derivative thereof), e.g., a maytansinoid (e.g., maytansinol or the DM1 maytansinoid, ~~see FIG. 15~~), a taxane, or a calicheamicin. A radioisotope can be an α-, β-, or γ-emitter, or an β- and γ-emitter. Radioisotopes useful as therapeutic agents include yttrium (^{90}Y), lutetium (^{177}Lu), actinium (^{225}Ac), praseodymium, astatine (^{211}At), rhenium (^{186}Re), bismuth (^{212}Bi or ^{213}Bi), and

rhodium (^{188}Rh). Radioisotopes useful as labels, e.g., for use in diagnostics, include iodine (^{131}I or ^{125}I), indium (^{111}In), technetium (^{99}mTc), phosphorus (^{32}P), carbon (^{14}C), and tritium (^{3}H), or one of the therapeutic isotopes listed above. The anti-PSMA antibody, or antigen-binding fragment thereof can also be linked to another antibody to form, e.g., a bispecific or a multispecific antibody. Examples of other agents that can be used in an anti-PSMA antibody therapy are described, e.g., in U.S. Pat. Nos. 6,107,090 and 6,136,311, and PCT Publication No: WO 02/098897.